UNIFIED CARRIER REGISTRATION FORM—UCR-2 VEHICLES OWNED AND OPERATED FOR THE 12 MONTH PERIOD ENDING June 30, 2014 UCR REGISTRATION YEAR 2015

(NOTE: this form is provided to assist you in maintaining required information. Carriers may also submit the requested data in electronic format or in a printout attached to this form. Contact Nebraska DMV for acceptable data formats.)

SECTION 1. GENER	AL INFORMATIO)N					
USDOT Number	MC or MX Number FF Number			Telephone Number			Fax Number
Logal Nama				E Mail Address			
Legal Name				E-Mail Address			
Doing business under the following	ng name (DBA)						
Principal place of business Street	Address (See instructions)						
Principal Province City	I r	In: . In			7:- C- 1-		
Principal Business City	P	Principal Business State			Zip Code		
Mailing Street Address	1						
Mailing City		Mailing State			Mailing Zip Code		
SECTION 2. CLASSIFICATION — C		back All That Apply					
	Motor Private Car		трриу				
SECTION 3. VEHICL							
		s that the follow	wing vehic	cles are THE TO	OTAL NUN	MBER (OWNED AND OPERATED
FOR THE 12 MONTH							
MAKE		MODEL/GVWR/		LICENSE PLATE		VIN NUMBER	
A. GED A IGUE ED LIGIG	Number of	Passengers	NUB	ER/STATE			
A: STRAIGHT TRUCKS							
AND TRACTORS							
B: MOTOR COACHES,							
SCHOOL BUSES, MINI-							
BUSES, VANS, AND							
LIMOUSINES							
Use reverse side if needed.							
SECTION 4. CERTIF							
		ertify that the above	ve information	on is true and corre	ct and that I ar	m authoriz	zed to execute and file this document
on behalf of the applicant. (P	enalty provisions subject	to the laws of Nel	braska.				
Name of Owner or Authorized Representative (Printed)						Date	
Signature						Title	

UNIFIED CARRI	ER REGI	STRAT	ION FORM U	JCR-2 Continued	
USDOT Number	MC or MX N	umber	FF Number	Carrier Name	
Continued					
MAKE		MODEL		LICENSE PLATE	VIN NUMBER
				NUMBER/STATE	
A: STRAIGHT TRU	ICKS			TOMBLIGHTIL	
AND TRACTORS	CRO				
THE THIRD TOTAL					
B: MOTOR COACH	HES.				
SCHOOL BUSES, M	IINI-				
BUSES, VAN, AND					
LIMOUSINES					
			·		
				I	1

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of

Make additional copies of this sheet if needed.

Instruction Sheet for UCR-2 Form

(NOTE: This form is provided to assist you in maintaining required information. Carriers may also submit the requested data in electronic format or in a printout attached to this form. Contact your state agency for acceptable data formats.)

When do I need to use this form?

• If you obtained the vehicle count for the numbers you entered in Section 4 of the 2013 UCR Registration Form from the number of vehicles you owned and operated for the 12-month period ending June 30, 2012 (Option B), and your fleet count using this method places you in a bracket with a lower fee than if you had selected Option A on the 2013 UCR Registration Form, you must maintain a list of vehicles covered by your 2013 UCR registration and provide this information on Form UCR-2 to your base state upon request.

Section 1. - General Information

• Enter all identifying information for your company. The owner and DBA name should be identical to what is on file for your USDOT number (See http://safer.fmcsa.dot.gov/CompanySnapshot.aspx). Enter the principal place of business address that serves as your headquarters and where your operational records are maintained or can be made available.

Section 2. – Classification (*Definitions*)

- "Motor carrier" means a person providing motor vehicle transportation for compensation.
- "Motor private carrier" means a person who provides interstate transportation of property in order to support its primary line of business.

Section 3. - Vehicle List

- List the Make, Model, License Plate Number and State, and Vehicle Identification Number (VIN) of each vehicle you owned and operated for the 12-month period ending June 30, 2012.
- If you need additional room you may use the continuation sheet on page 2 of the UCR-2 form. You may make additional copies of this continuation sheet as needed.

Section 4. - Certification

• The owner or an individual who has a power of attorney to sign on behalf of the owner or owners must sign this form. This certification indicates that the information is correct under penalty of perjury.